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Vol. VII SEPTEMBER, 1921 No. 9

Putting the Christmas Seal Sale Over

By BASIL G. EAVES, Campaign Secretary of the National Tuberculosis Association

To put the Christmas seal sale over with a sale equal to that of last year will require an amount of effort and energy greater than has ever been expended before by state, local and national organizations. In saying this I am not attempting to sound a pessimistic note. I am reflecting merely the business conditions of the country.

While a few state and local organizations are fully aware of the magnitude of the task ahead of them, judging from such meager reports as we have been getting at headquarters, the great majority of local sale agents, to say nothing of a considerable number of the state secretaries, are taking the Christmas seal sale for granted and are making the same type of mediocre preparation that has usually resulted in merely scratching the surface. If I am not mistaken, it will take a much stronger tool than has been used before even to scratch the surface this year. And if we are to dig down into the pockets of the community, it will take a sharp crowbar with plenty of power and punch behind it.

All of which leads me to say that the local or state seal agents who are not now hustling hard and fast to organize their sale are likely to find themselves about the middle of December wondering where their next year's bread and butter is coming from.

What are some of the salient points of organization that should be stressed at this particular time, in the month of September, 1921?

Lists

Now is the time to complete lists. As a matter of fact, in those communities where large lists are needed, work on them should have been begun months ago. A list even of five hundred cannot be built in a day or two. It is the veriest platitude to say that quality in lists is much more desirable than quantity, and still how often have I witnessed the spectacle of a tuberculosis secretary rushing in panicky haste, about December 1, to the telephone book, the city directory, or an automobile list and using names promiscuously to solicit by mail, personally and in other ways, without any effort to cull the list for quality, or to select the names for various specific purposes.

Potentially, every man, woman and child in the community is a seal buyer. As a matter of practical application, however, the tuberculosis executive must determine long before the seal sale starts approximately how many seals each person ought to buy or can buy.

The average commmunity breaks itself up for purposes of seal sale lists into several groups. For example, there is the outstanding citizen who can and should buy bonds or seals in large quantities. In using the term "large quantities," I realize that what may be a large quantity in one community may be a small one in another. Then there are also in the community groups who should buy as groups. I refer to firms, corporations, lodges, labor unions, Sunday school classes, etc. The extent to which in any individual community a lodge, for example, should be solicited as a group rather than as individuals, is something that only the local secretary can determine after careful analysis of the situation. Then, finally, there are all the rest of the folks in the community, men, women and children, who can and will buy seals in small quantities if they are asked to in the right way.

Methods

It seems almost unnecessary to talk of methods of seal sale in this fourteenth annual event, and yet I know of communities where seal sales have been held ever since the year one, and where even to-day methods are fitted to lists that are wholly unfitted to the methods.

It goes without saying that the character of the lists will determine the method to be employed. If the list has been rightly built and grouped as indicated above, it will not be necessary to state that it is a wrong method to send a letter asking for a dollar's worth of seals to a man who ought to give a hundred or five hundred dollars. Neither will the executive make the mistake of soliciting a firm or a group for a two-dollar contribution when they ought to give fifty or one hundred dollars.

Every live agent will use every known method of selling seals, just the same as every live salesman of automobiles, soap or toilet preparations uses every known method to sell his goods. He will use the mail for those who can best be reached by the mail. He will use booths and other general methods to solicit those that can best be reached that way. He will use school children, women's clubs and lodges, etc. There is no general rule that will apply to all communities as to which method should be used in which way.

A wide experience, however, seems to indicate that it is better to solicit those who will need personal solicitation before other methods are applied. The mail sale, the booth sale, the group sale, the use of school children will come afterwards so as not to impair the value of the personal solicitation. That there are exceptions, however, to this general rule is borne out by the experience of everyone.

Machinery

An executive of a large association recently wrote to me that he was going to be too busy in September and October unpacking, repacking and shipping seals and printed matter, to attend to certain fundamentally necessary details of organization in his territory. The absurdity of such misuse of time is apparent. To be sure, the plea is made that not enough money is available and that the executive has to be stenographer, shipping clerk, field organizer, seal sale manager and everything else. The blame for failure of the seal sale, which is a foregone conclusion in this particular case, must rest both upon the executive and his board of directors.

Now is the time to get the machinery set up and to get it ready to run when the steam is turned on in November and December. Organization, whether it be in a town of 5,000, a city of 100,000, or a state of several million, demands careful personal supervision. I still have to see the successful organization for a seal sale that has ever been set up by correspondence. I have seen such organizations, but I wouldn't call them distinctly successful.

The machinery for a seal sale may range all the way from a temporary committee of several live wires to a highly organized individual soliciting campaign that covers every nook and corner of the territory. Whatever the

(*Continued on page 2*)

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Tuberculosis Worker Makes Economic Survey

Mr. Barclay Spicer, former Executive Secretary of the Pennsylvania Association, has just returned from Ireland, where he made an economic survey of conditions in that country, to be presented to Premier Lloyd George and a Special Committee.

Putting the Christmas Seal Sale Over

(*Continued from page* 1)

machinery is, there are certain groups in the community that the tuberculosis secretary must enlist. There is, first of all, the medical profession, to whose support the whole tuberculosis movement look. Secondly, there is a substantial business men's organization or group that must be allied with the seal sale. Third, there are the labor unions and the workingmen's organizations. Fourth, there are the church and religious organizations. Fifth, there are the social agencies, including women's clubs and social clubs of various kinds. Sixth, there are the fraternal orders, which, in some places, are of tremendous importance. Seventh, in rural communities there are the rural agencies or organizations. Other organizations and groups will also appear in various communities. The machinery for a seal sale that does not recognize these constituent groups of any population is not getting the most out of its seal sale.

How to organize these groups would require a treatise of much greater length than this particular article can pretend to. In a word, if it is a group action that is desired, the wise secretary will find who is the key person, or who are the key persons in the group. Business, religious, social and other groups usually have one or two people in each that stand out as the significant leaders. They are the "bosses," the "politicians," the people who pull the strings in the organization. The support of these leaders must be secured by selling them the program and methods of the tuberculosis machinery.

Program

All of which leads me to say that underlying any successful seal sale, the most important thing is a real program that will appeal to the groups that I have mentioned and to others. I know of scores of tuberculosis associations that are going into the seal sale this year with a hazy kind of notion as to the type of program that they are going to have next year. They haven't the remotest idea as to what their budget will be, and most of them are going on the assumption that the budget will be equal to the seal sale. That may be true, but that is not a very wise way of going into the seal sale. The hard-headed business man of the community, to whose support the tuberculosis association must appeal, is not likely to be enthusiastic unless he sees a program that has first of all back of it a clear conception of what the tuberculosis movement is going to do for individuals and the community; and, secondly, a clean-cut definition of the functions and methods of the tuberculosis organization. Many local organizations, for example, raise money from the Christmas seal sale to support a nurse, but when the average business man asks what is the nurse going to do and how is she going to help, and what effect will she have on the health of the community, the local secretary faulters and stammers in embarrassment and finds to his amazement that he had never thought of these particular points.

Now is the time to take stock of what you have done during 1921—in other words to ascertain how you spent the money raised in the 1920 seal sale. This information should be drawn up in table form if possible, ready to be used in any publicity you may distribute and as a basis for selling arguments either by letter or in conversation. Be sure you have the facts and then stick to them, so that there will be no conflicting statements as to what you have done.

The boiled-down record of accomplishment in the past and the program for the coming year comprise your "talking point" in the sale. Prepare them now and keep copies of them before you and every member of your staff.

A local program must be definitely fitted to local conditions. On the other hand, it will naturally adapt the experience of other communities to itself. A tuberculosis secretary recently asked the National Association what should be done next, now that a nurse he had been supporting by seal sales was being taken over by the local community. This particular secretary seemed to think that once that accomplishment had been achieved there was nothing more to do for the local tuberculosis society. A moment's reflection, however, proved that the community had a number of other needs, such as, for example, education, an organization to secure hospital and sanatorium care for the tuberculous, an open-air school, some sort of clinical machinery that would aid in the diagnosis of tuberculosis, a full-time health officer. In fact, the community needed everything except this one particular nurse. It even needed a dozen more nurses, and the tuberculosis secretary was thinking that the job was done. The job of tuberculosis is not done until the death rate has been reduced to a minimum and the number of living cases is curtailed practically to nothing.

Conclusion

In concluding this brief appeal, and it is an appeal to every red-blooded seal agent, let me say that over fifteen years of dealing with state and local organizations throughout the country has brought to us a wide knowledge of Christmas seal problems that is at the disposal of every tuberculosis worker in the country. We shall welcome requests for service, and, so far as it is humanly possible, will endeavor to meet them within the limits of our arrangements with state and local organizations and within the limits of our own staff and personnel.

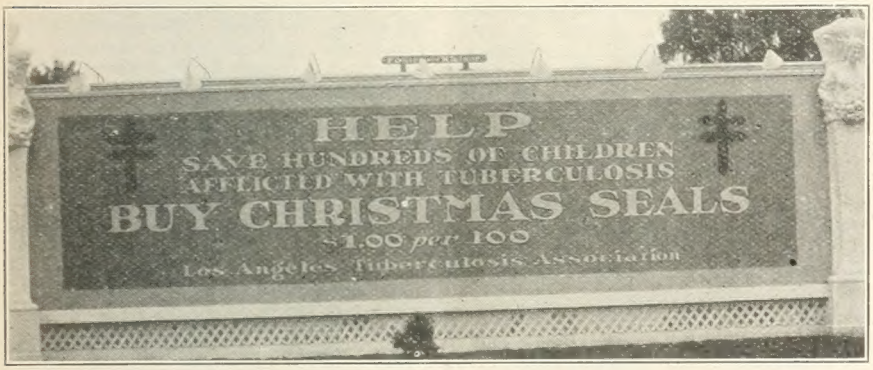
Annual Meeting Abstracts

The National Association has still on hand a number of abstracts of papers presented at the Seventeenth Annual Meeting of the Association in New York. These abstracts cover the principal paper in most of the sessions. A copy of the abstracts will be sent free on request to any reader of the Bulletin.

It Pays to Advertise

The cards in the upper corner are samples of the printed matter issued during the 1920 seal sale by the New York Tuberculosis Association for general distribution.

PRINTED MATTER FOR SEAL SALE



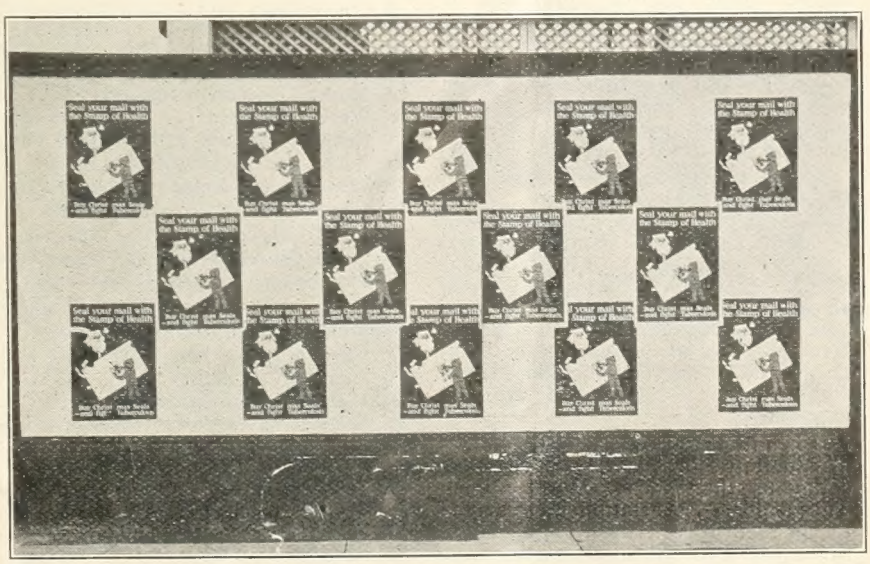
ONE OF THE METHODS BY WHICH THE LOS ANGELES TUBERCULOSIS ASSOCIATION ADVERTISED THEIR SEAL SALE

The card marked A was used as a stuffer for the mail sale. This card illustrated some of the work accomplished with the money derived from the seal sale in the particular district in which the card was distributed. Card B similarly illustrated the work done by the association in another district of the city. Card C was used to accomplish a personal appeal sent by the prominent members of the board of directors of the association. Its reverse side summarized briefly items of work that would appeal especially to the women's auxiliaries. Each card bore on the reverse side a brief report of the work done during the previous year, with funds derived from the seal sale.

A leaflet entitled, "Why you should help" was the backbone piece of literature used in soliciting contributions from business firms and corporations as a means of explaining to them what was done with the funds raised. A certain number of these little leaflets were utilized for distribution in the seal sale booths.

The association issues a monthly bulletin, and the November number was a piece of literature most used during the seal sale. One copy was enclosed with every one of 50,000 letters sent out for the mail sale of seals and an extra 2,000 was sent out as part of the mailing list to the regular recipients of the association's bulletin. The remainder was used for public distribution in booths.

The first point considered in publishing printed matter for the seal sale was to use illustrations and texts that could be quickly read by people who had not time to read detailed stories.



STRIKING EFFECT OF SEAL POSTERS AS USED LAST YEAR BY THE OHIO PUBLIC HEALTH ASSOCIATION

A New Industrial Study

On August 1st The National Tuberculosis Association began an investigation of the standards of employment for tuberculosis persons and a study of the health hazards in industry as they relate to tuberculosis. This study is being financed jointly by the National Tuberculosis Association and the Federal Board for Vocational Education. It will be directed immediately by Mr. Walter I. Hamilton, who until recently was Chief of Training Relations in the Rehabilitation Division of the Federal Board for Vocational Education. On the staff of the National Tuberculosis Association Mr. Hamilton will have the title of Industrial Research Secretary. He will be a member of the staff of the Medical Service.

The study conducted by Mr. Hamilton will involve an analysis of the operations or processes of the leading industries of this country, to determine, first, what are, if any, the peculiar health hazards of these processes to tuberculous persons and all persons who are likely to become tuberculous; and second, to ascertain in what particular processes or departments of various industries persons who have had tuberculosis can be employed with profit to themselves and the industry.

The study will involve a consideration of the following groups of factors:

1. Factors due to the personality of the worker.

2. Factors due to the conditions of the work.

3. Factors due to the materials and processes.

The tendency heretofore has been to class certain industries as unsuitable for tuberculous persons, and others as more or less suitable. For example, stone cutting, printing or grinding industries have been considered unsuitable. An analysis of some of the various processes of these industries will probably disclose the fact that tuberculous persons can be employed with profit to themselves and the industries in certain departments or processes of such industries and not in others.

As part of the study, an effort will be made to furnish vocational guidance and placement to a limited number of tuberculous persons who will be selected for such experimental purposes. Such guidance will necessarily involve a careful clinical examination and a study that will include the individual, the vocation and the job location.

It is anticipated that it will take approximately three years at least to complete the study. The National Tuberculosis Association has decided to spend $10,000 a year for the next three years for this purpose and the Federal Board for Vocational Education is making available a similar amount.

The Hub

Sidelights on the Tuberculosis Campaign as Conducted from National Headquarters

How the Money Was Spent in 1920

The statistical service of the National Tuberculosis Association has compiled a consolidated report of state associations for the calendar year 1920. The figures are for the 48 state associations, the Detroit and Columbia, and the associations in New York, Brooklyn, Pittsburgh and Chicago. Money spent by other local associations is not included, as they do not report directly to the National Tuberculosis Association . It is interesting to note that contrary to popular notions, the amount spent in fund-raising campaigns is much smaller than has generally been believed. Out of a total of over $2,395,000 only 12.64% was spent in fund-raising campaigns.

Nearly 31% (30.70%) was spent for salaries. Of this 12.42% was for salaries of executives, 5.91% for nurses, and 4.04% for stenographers. In associations doing educational and organization work the fact that less than one-third of the money is spent for salaries indicates that by far the larger part of the seal money is being spent in proper channels.

Another reflection of this fact is found in the percentage spent for material relief of various kinds. Including payment for patients in sanatoria, material relief, and the maintenance of dispensaries, hospitals, etc., not all of which may be properly considered as relief, the total is hardly 12%.

The Modern Health Crusade costs approximately 4.48%. It is difficult to ascertain this percentage accurately because of the improper distribution of salaries in all cases. The total expense for educational supplies and definite educational work of various kinds is approximately 12%.

The following table indicates the expenditures in detail. The numbers refer to the numbers on the standard report forms issued by the National Tuberculosis Association:

Consolidated Report of Expenditures by State Associations for the Calendar Year 1920

Items of expenditure.	Total amount spent by all state associations.	Per cent. of total amount spent.	
All expenditures	$2,395,978.13	100%	
1. Traveling expenses	135,245.19	5.64	
2. Rent	47,142.34	1.97	
3. Light and heat	6,492.25	.27	
4. Stationery, office supplies, etc.	62,613.64	2.61	7.21
5. Postage and express	41,622.38	1.74	
6. Telephone and telegraph	14,777.38	.62	
7. Literature and printed matter	57,135.62	2.38	
8. Conferences and institutes	20,260.58	.85	
9. Exhibits	19,196.86	.80	
10. Fund raising campaigns	302,750.47	12.64	
11. Special campaigns	12,432.04	.52	
12. Modern Health Crusade	107,371.10	4.48	
13. Motion pictures	12,402.70	.52	
14. Regular bulletins and journals (net cost)	26,075.69	1.09	
15. Books and periodicals for office	1,731.91	.07	
16. Lectures and lecture supplies	3,767.69	.16	
17. Formal instruction of workers	1,549.91	.06	
18. Industrial work	28,162.61	1.18	
19. Construction and equipm't of dispensaries, etc.	29,178.02	1.22	
20. Maintenance of dispensaries, etc	217,666.49	9.08	
21. Payment for patients in other sanatoria, etc.	11,658.99	.49	
22. Material relief; food, fuel, etc	23,786.45	.99	
23. Equipment for home treatment	.....	....	
24. Auditing accounts	1,845.03	.08	
25. Medical examination of staff	62.50	....	
26. Salaries of executive secretaries, etc.	297,570.24	12.42	
27. Salaries of nurses	141,506.50	5.91	
28. Salaries of social workers	41,771.42	1.74	
29. Salaries of visiting housekeepers	2,007.10	.08	30.71
30. Salaries of medical field secretaries, etc.	42,888.22	1.79	
31. Salaries of stenographers	96,867.64	4.04	
32. Salaries of clerks	39,061.96	1.63	
33. Salaries of other workers	74,273.92	3.10	
34. Miscellaneous	354,078.01	14.78	
Distributed to local associations	121,025.28	5.05	

Modern Health Crusade

DEPARTMENT

Bulletin of the

National Tuberculosis Association

SEPTEMBER 1921

Idaho Wins Inter-State Cup. Washington Gets Inter-City Cup

Schools in eleven states, from Maine to Idaho and Texas, have won trophies in the Crusaders' National Tournament. The second tournament for the last school year came to a close June 11th, and the rewards from the National Association are this month being presented to the re-assembled schools

Iowa, New York and Illinois win the 11 banners for the best scores in the several tournament divisions, while Idaho, Wyoming, South Dakota, Nebraska, Texas, Iowa, Illinois, Pennsylvania, New Jersey, New York and Maine win 104 pennants. The pennants are prizes won by contestants enlisting 100 per cent. knights banneret in 15 weeks but with lower averages of chore performance than scored by banner winners. The banner winners are the champions most to be compared to "that Arthur who, with lance in rest, from spur to plume a star of tournament, shot thro' the lists of Camelot."

New York City carries off tournament honors for the first time, but, to make up for delay, wins more than any state except Iowa, which has the unprecedented record of 6 banners and 50 pennants. Staten Island, a part of New York City, wins for the entire state second place, in number of trophies, in the entire country.

The silver banneret cup, the prize in the inter-state contest, is won for one year by Idaho, following its possession by Iowa during the year just ended. In order to be possessed permanently, it must be earned by the school children three times. The contest is to qualify the most Crusaders as knights banneret, in ratio to total school enrollment, within the year. The scores of the three leading contestants are:

Idaho	.109
South Dakota	.078
Iowa	.074

Honorable mention is made of Wisconsin and New Hampshire.

Washington wins the inter-city silver cup for the next school year. This contest is between cities of 100,000 or more inhabitants. The test and the conditions are the same as in the inter-state contest, the enlistment of the most knights banneret for the school enrollment. Second place in the inter-city was won by Des Moines.

Winners of Banners

Division I. Rural School, Sumner, Iowa.
Division II. Diamond Lake School, Montgomery, Iowa.
Division III. Grade 2A, Greenwood School, Des Moines, Iowa.
Division IV. Grade 2B, School 16, Staten Island, New York.
Division V. Grade 4B1, School 16, Staten Island, New York.
Division VI. Grade 4B2, School 14, Staten Island, New York.
Division VII. Grade 6, Rockwell, Iowa.
Division VIII. Grade 5A2, School 14, Staten Island, New York.
Division IX. Grades 7 and 8, Lovejoy School, Mound City, Ill.
Division X. Grade 7, Webster School, Oskaloosa, Iowa.
Division XI. Grade 9A2, Hiatt Junior High, Des Moines, Iowa.

Winners of Pennants

Idaho
Center Valley School, Colburn.
Grade 1A, Mountain Home.
Grade 1B, Mountain Home.
Grade 3, Mountain Home.
Grade 4, Mountain Home.
Grade 4, Plummer.
Grade 6, Van Buren School, Caldwell.
Grade 6, Washington School, Caldwell
Grades 6 and 7, Washington School, Caldwell.
Grades 7, 8 and 9, Santa.

Wyoming
Grade 6, Johnson School, Cheyenne.
Grade 8, Central School, Cheyenne.

South Dakota
Center School, Madison.
Zuelke School, Madison.
Grades 1, 2 and 3, Franklin School, Madison.
Grades 3 and 4, Ramona.
Grades 5 and 6, Ramona.
Grade 8, Miller.

Nebraska
Grade 8, Sacred Heart School, Omaha.

Texas
Grade H3, Van Zandt School, Fort Worth.
Grade L6, Smith School, Fort Worth.
Grade H6, Smith School, Fort Worth.
Grade H6, Van Zandt School, Fort Worth.

Iowa
District 4, Mason City.
Hurley School, Rockwell.
Rural School, Waverly.
Grade 1, Bancroft.
Grade 1A, Greenwood School, Des Moines.
Grade 1, Consolidated School, Pierson.
Grade 1, Sacred Heart School, Pocahontas.
Grade 1, Consolidated School, Roland.
Grade 2, Audubon.
Grade 2, Garfield School, Cherokee.
Grade 2, Lincoln School, Cherokee.
Grade 2B, Greenwood School, Des Moines.
Grade 2, Consolidated School, Pierson.
Grade 2, Sacred Heart School, Pocahontas.
Grade 3A, Greenwood School, Des Moines.
Grade 3B, Greenwood School, Des Moines.
Grade 3, Sacred Heart School, Pocahontas.
Grade 3A, Consolidated School, Roland.
Grade 3B, Consolidated School, Roland.
Grade 4A, Greenwood School, Des Moines.
Grade 4, Sacred Heart School, Pocahontas.
Grade 4, Consolidated School, Roland.
Grade 4, Fiske School, Waterloo.
Grades 4 and 5, Bancroft.
Grade 5A, Lincoln School, Newton.
Grade 5, Sacred Heart School, Pocahontas.
Grade 5, Consolidated School, Roland.
Grade 5, Sargeants Bluff.
Grade 5, Alcott School, Waterloo.
Grade 6A, Greenwood School, Des Moines.
Grade 6, Sacred Heart School, Pocahontas.
Grade 6, Consolidated School, Roland.
Grade 7B, Garfield School, Cherokee.
Grade 7A, Greenwood School, Des Moines.
Grade 7B, Greenwood School, Des Moines.
Grade 7, Sacred Heart School, Pocahontas.
Grade 7, Alcott School, Waterloo.
Grade 8A, Greenwood School, Des Moines.
Grade 8B, Greenwood School, Des Moines.

Grade 8A1, Hiatt Junior High, Des Moines.
Grade 8A4, Hiatt Junior High, Des Moines.
Grade 8B2, Hiatt Junior High, Des Moines.
Grade 8, Sacred Heart School, Pocahontas.
Grade 8, Consolidated School, Roland.
Grade 8, Fiske School, Waterloo.
Grade 9A3, Hiatt Junior High, Des Moines.
Grade 9B2, Hiatt Junior High, Des Moines.
Grade 11, Sacred Heart School, Pocahontas.
Grade 12, Sacred Heart School, Pocahontas.
High School, Roland.

Illinois

Walker School, Clifton.
Grades 5 and 6, Monroe School, Lincoln.
Grades 7 and 8, Thawville.

Pennsylvania

Grade 6A, Fourth Ward School, Warren.
Grade 6A, Jefferson Avenue School, Warren.
Grade 7A, Jefferson Avenue School Warren.
Grade 7A, Jefferson Avenue School Warren.
Grade 7B, South Street School, Warren.

New Jersey

Grade 5B, Haddonfield.

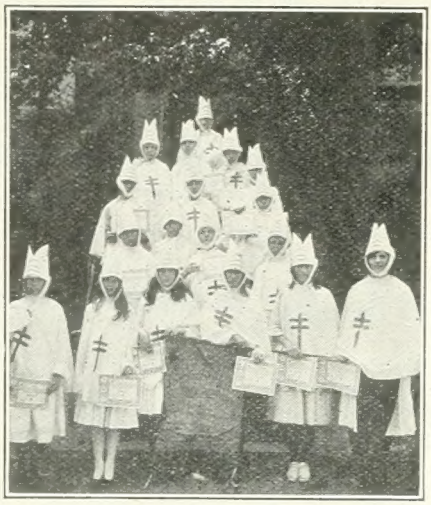
New York

Grade 1A, School 32, Staten Island.
Grade 2B, School 15, Staten Island.
Grade 4A1, School 14, Staten Island.
Grade 4A1, School 16, Staten Island.
Grade 4A1, School 17, Staten Island.
Grade 5A, School 15, Staten Island.
Grade 5B, School 15, Staten Island.
Grade 5A, School 16, Staten Island.
Grade 5A2, School 17, Staten Island.
Grade 5B2, School 17, Staten Island.
Grade 6B1, School 14, Staten Island.
Grade 6B, School 15, Staten Island.
Grade 6B, School 16, Staten Island.
Grade 6A1, School 17, Staten Island.
Grade 6A3, School 17, Staten Island.
Grade 7B1, School 14, Staten Island.
Grade 7A2, School 16, Staten Island.
Grade 7A, School 17, Staten Island.
Grade 7B2, School 17, Staten Island.
Grade 8B1, School 14, Staten Island.
Grade 8A, School 16, Staten Island.

Maine

Longfellow School, Fort Fairfield.

The next national Crusade tournament will be held between September 4, 1921, and February 25, 1922. Each school or class may select any fifteen consecutive weeks for which to present its record of chores, out of those twenty-five weeks. Eleven banners will be awarded, and a pennant to every contestant making a score of 15. Apply to your state association for a tournament guide circular.



KNIGHTS OF THE ROUND TABLE, MORGAN SCHOOL, WASHINGTON, D. C.

Round Table Appraised by School Authorities

"The Round Table is a thorough and beautifully balanced health program that requires but little extra work of teachers, while it gives pupils incentive to meet standards of fitness," writes R. M. Sealey, superintendent of schools at Tallahassee, Fla., in which city children first qualified for the highest Crusade honors. "Having had practical experience with this advanced program of the Modern Health Crusade, I want to give it my hearty endorsement. The use of the Arthurian legend is distinctly valuable in supplying a romantic urge. The Round Table is in line with the tendency of many schools to give more attention to athletics, nutrition, posture, etc., and it is to be hoped that other schools will be led to take up these features of health work, through the attraction of the Round Table plan."

The Round Table, while a purely optional feature of the Crusade system (as in fact is everything beyond the performance of the chores and award of chivalric titles), has captured the enthusiasm of both teachers and pupils. Most of the Knights of the Round Table are from the 6th to the 9th grades. The pupils of the Washington school, shown in the accompanying photograph, are from the 8th grade. But seats at Arthur's Table may be won by Crusaders in the 5th or 4th grades through meeting the simple requirements in nutrition, posture, physical examination or study of hygiene. The National Tuberculosis Association will send the manual giving full explanations to any school that applies for it.

The value of the Round Table to high-school pupils is stated in the following article. The Knights R. T. of Hunter College High School, New York, received their titles at the annual meeting of the National Tuberculosis Association in a ceremony in which the flags from the eight nations where the Crusade is in use were introduced.

Miss Marion Perkins, director of the Department of Biology, Hunter College High School, makes the following statement:

"The Health Crusade used in the first year of Hunter College High School establishes in most of the pupils good habits of personal hygiene. In the upper classes the work is continued informally and interest is maintained through a health club composed of pupils who have met the requirements for Knights of the Round Table and some other requirements.

"There are four directions in which the Round Table work has been of special assistance: Nutrition, care of teeth, care of eyes, and proper clothing, especially shoes.

"In regard to nutrition, every girl who was found in February to be below the minimum weight for height and age has made a steady gain. Many have reached normal weight, and one girl in so doing gained fifteen pounds between February and June. The incentive of the Crusade induced her to go to bed earlier, take more rest in the daytime, and really stuff herself with food!

"In regard to teeth, with three exceptions, every pupil has had her teeth examined by a dentist, has had all cavities filled, and has brought a certificate from the dentist showing that the work has been done.

"In regard to eyes, we give the standard eye test. With three exceptions, every girl who gave evidence of impaired vision has been examined by an oculist and has returned to us either with glasses or with a statement from the oculist that she does not require them.

"In regard to clothing, many of the girls have stopped wearing high-heeled, pointed-toed shoes to school. We do not ask that they wear strictly hygienic shoes in the evening, but that they wear broad-toed, low-heeled shoes about their daily occupation, and that they dress in such a way that they have complete freedom of movement of the whole body.

"The results of Crusade work in our school have been so noticeable that the entire staff of the school has commented upon the improved personal hygiene and physical condition of the students. I am quite certain that, wherever a community is not convinced of the necessity of or the value of the Crusade, they will be enthusiastically for it as soon as they see it actually in practice. If one teacher who is intelligently interested in health work is allowed to introduce the Crusade in her classes, and if at the end of six months the condition of her pupils is compared with that of other children of the same age in the same school or in other schools, the community will be entirely convinced."

The Modern Health Crusade and the Nutrition Movement

(Abstract from a paper read by Charles M. De Forest at National Conference of Social Work, Milwaukee.)

No health agencies could more cordially welcome a systematic campaign against malnutrition than the anti-tuberculosis associations. Tuberculosis workers are prone to class all malnourished children as "pre-tuberculous." Just as the tuberculosis associations have labored for open-air schools, with rest periods and lunches, they are promoting weighing and measuring and nutrition classes and clinics.

Tuberculosis campaigners wish to multiply the means of prevention, relief and cure for adults, but that is not the strategy on which they ultimately depend. It was expressed the other day by a Montana reporter: "If you want to put this health thing across, you must catch the kids." The Modern Health Crusade launched by the National Tuberculosis Association is a dragnet for catching the kids for health.

In the last four years more than six million Crusaders have enlisted in a new chivalry, to become squires, knights and knights banneret through health feats.

The Crusaders' feats are real ordeals. They do week after week daily health chores that are abominated by the average boy or girl. The charms of health knighthood motivate the Crusader to faithful performance of the chores when no end of admonishing would.

Faulty as is our knowledge of health laws, it is enough to lengthen life immensely if we apply it. The great lack is *will to apply.* Children do not need extensive knowledge of "calories" and "vitamines." What they need is a rule of thumb and an everlasting will to apply.

Many interesting and valuable stunts, such as clowns and knighting ceremonies have been introduced. They supply children with the *interest* that must precede *will* to act. And these stunts get action—for a while. But without follow-up, stunts are ephemeral.

The much overlooked law of habit formation requires continuity of action. The desideratum is good health habits, and there is no short cut to habit. There must be repetition. The central fact in the Modern Health Crusade is not its stunts, but the repetition of hygienic duties day after day for fifteen to thirty weeks, and in hundreds of schools year after year. The Crusade creates and sustains interest so that will *keeps* functioning and repetition leads to habit.

The problem of health is twofold: to escape the causes of disease, and also to build up strength for life's work and for resisting those causes of disease that are not escaped. There are so many of these causes and so many factors on which strength depends that the problem is like that of a besieged city. Watch must be maintained against *every* form of attack, and the defense must be strong at *every* point. He who would live long and strong should remember Babylon, thick-walled, but surprised through the bed of a deflected river.

Is it any wonder that most men overlook some approach of the enemy or weak spot in the walls? So much medical advice stresses one factor to the apparent scorn of others! Following one line of advice, our attention is so given to avoiding infectious contacts that our neglected resistance is sure to break down under degenerative disease if not from the germs that get by us. In the other direction, one popular book, full of practical advice on diet and digestion, gives the impression that, with these right, infectious germs may be ignored; in fact, considered *friends.* A set of health rules for children, repeatedly published, omits washing hands before meals, keeping infectious things out of the mouth, good posture and other essentials.

There is danger lest nutrition workers let their teachings be one-sided. It is accordingly most gratifying when nutrition authorities emphasize the need of all-around health training. Bad posture blocks good digestion. Both rest and exercise are needed by the malnourished. "Vigorous outdoor exercise" is advocated in one of the pamphlets of the Child Health Organization.

If anyone believes that the health campaign for children can rest with building weight up to normal, his attention should be called to Kobrak's investigations seemingly indicating that the incidence of scarlet fever is less among undernourished children. As for overfed children, it is asserted by some physicians that they are more prone to have enlarged tonsils, lumpy glands, adenoids and catarrah than those who are lighter in weight.

This is not cited to contend that children's weight had better be less than normal. The incidence of some other diseases, notably tuberculosis, is greater among the underweight. The citation is made to illustrate the necessity of attention to many health factors and not to a regimen limited to securing normal weight. The nutrition propaganda of Emerson is directed against both overweight and underweight, and emphasizes the need of removing various physical defects.

The health rules inculcated by the Modern Health Crusade include not only food, air, exercise, rest and posture, but exclusion of infection, cleanliness, healthful *thinking,* and cooperation for public health. The scope of the Crusade is hygiene. Hygiene includes nutrition and much more. It should be remembered that every Crusader makes a mark of at least 75 per cent. in the performance of chores repeated week after week.

Every Crusade chore record carries blanks for recording the child's weight in comparison with normal weight for his height. Through its order of the Round Table the Crusade strongly motivates both undernourished and overweight school children to attain normal weight, and to take complete physical examinations periodically, with remedial treatment.

The Modern Health Crusade is promoting nutrition in every state in the Union, and in several foreign countries. This does not mean for a minute, however, that specialized nutrition work outside the Crusade is not needed. If one-third of the 22,000,000 American children of school age are malnourished, legions of them should be brought to nutrition classes and clinics. One need not be a pessimist, however, to predict that it will be impossible to establish enough nutrition clinics and classes. In these times of curtailed expenditure, we must depend to a large extent on methods of education that cost but little and that reach homes on a wholesale scale.

The Modern Health Crusade is such a method. The work, conducted by ordinary school teachers, costs from 5 to 10 cents per child for thirty weeks' intensive drill in good health habits. To a large degree, home work, the Crusade links the homes to the school and reaches parents and others of non-school age. Thus the Crusade broadcasts nutritional teaching from the school and wins community support for nutrition classes and school lunches.

Institute on Nutrition Problems

Under the auspices of the Tuberculosis Association of Rochester and Monroe County, a second institute on the nutritional problems of children will be conducted October 3 to 15 by Dr. William R. P. Emerson, of Boston. Since Dr. Emerson conducted his institute in Rochester last fall the nutrition class work throughout the country has grown by leaps and bounds. As the work has been under way in Rochester through public and parochial schools for one year, the second institute will offer an unusual opportunity to its members. Registration is limited to 200, and applications will be accepted in the order received.

Dr. Emerson has found that successful nutrition class workers may be had from four groups: teachers, public health nurses, social workers and dietitians. It is not recommended that persons without experience in one of these lines take the course with the idea of doing actual nutrition work. Anyone desiring, however, may take the course, but certificates of qualification as nutrition workers will be issued at Dr. Emerson's discrimination at the end of the course.

School Books Devoting Space to the Crusade

"The Play House" (home hygiene), Book I, in the *"Modern Physiology, Hygiene and Health"* series of J. B. Lippincott (Phila.), has a chapter on the Modern Health Crusade. The basic program of the Crusade is explained, and directions are given for open-air sleeping. Pupils are advised to ask their teachers to write to the National Association for Crusade material.

This book, published this year, gives facts of hygiene and sanitation in interesting narrative form for elementary readers. The author, Mary S. Haviland, is a research secretary of the National Child Welfare Association.

"Healthy Living; The Body and How to Keep It Well" (Book I), by Prof. A. Winslow, of Yale.

This book opens with an account of how boys of the olden times were made knights. A later chapter reproduces a Crusade chore record (early edition), and refers to the National Association. It is a modern, interestingly written book of hygiene and physiology combined with practical applications. The publishers are Charles E. Merrill Co., New York and Chicago.

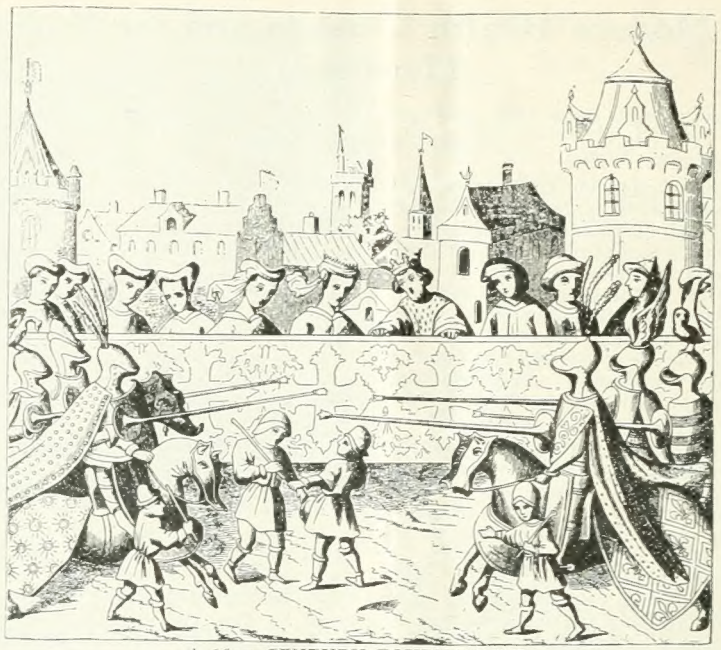
"Hygiene and Health," by Prof. C. P. Emerson, of Indiana University, and G. H. Betts, of Northwestern University.

The first chapter is entitled *"Making Our Habits Our Friends,"* and the third *"Health Crusaders."* The eleven standard chores and the scoring place of the Crusader's record are reproduced. The publishers are The Bobbs-Merrill Co., Indianapolis. *"Physiology and Hygiene,"* by the same publishers, prints as a frontispiece the directions given in the Daily Health Guide of the National Association.

In addition to the above text-books, a supplementary reader on the Crusade has just been brought out by the World Book Company, Yonkers. It is *"The Perfect Gentle Knight,"* written by Dr. Hester D. Jenkins. It is a small, inexpensive book, the reading of which adds in a practical way a romantic urge to the performance of the health Crusader's duties.

Dr. May Farinholt Jones, Mississippi, has in preparation a revision of her *"Keep Well Stories"* (Lippincott). This book in its present edition, containing a story devoted to the Christmas seals, has been serviceable to many tuberculosis associations. In the new edition Dr. Jones proposes to feature the Modern Health Crusade.

J. H. Binford, Assistant Superintendent of the Richmond (Va.) Public Schools, has in preparation a health text-book to contain Modern Health Crusade material.



A 15TH CENTURY TOURNAMENT
(From "The Perfect Gentle Knight")

Crusade Introduces School Lunches

By Arthur J. Strawson

In traveling for the National Association one may observe many communities in which school lunches are being provided. In one western county hot school lunches have become the rule throughout all the rural sections. While parents send many items of food for these lunches, the unavoidable expenses are met by socials and entertainments in which Modern Health Crusade playlets are the important drawing features. The charge for admission is very light, but yet sufficient to make up the deficiency in the hot lunch expense.

In a rural community in Indiana, the interest of parents in having hot lunches for their children was aroused through the keeping of Health Crusade chore records. Since there were no special facilities at school, the parents combined forces to provide the hot lunches. Each day the meal was cared for by a designated group, and a menu for the week was planned to avoid monotony. Every day a liberal quantity of fresh milk, together with hot soup or some simple, wholesome food, was brought at noon by the parents on duty. While it was a large school, the work was divided among so many parents that it did not become onerous. Neither was the cost greater for any parent than the provision of cold lunches for her child each day. In fact, it was considered a much simpler and easier adjustment of the lunch plan, as the mothers preferred to cook the meal for a whole school once in two weeks rather than to prepare a cold lunch each day for their own children.

In one large city the board of education has delegated a full-time worker to assist the group of school-lunch workers, whose work is privately financed by the citizens. The lunches are paid for by tickets, but if a child cannot afford the tickets they are slipped to him by his teacher in a way that greatly reduces the embarrassment that would take place if it became generally known that he could not bear the expense of his own lunch.

In Cairo, Illinois, the teachers of the colored schools found that many of their pupils whose mothers, as well as fathers, were employed, were spending from 10 to 15 cents a day on a grocery store lunch, which was apt to consist of dill pickles and ginger snaps. The effect on these children was obvious. The teachers put the matter before the school board and secured a gasoline stove and its fuel. Each child was asked to bring a cup, a saucer and a spoon. Storekeepers and school patrons in the colored section were solicited for donations of staple foods. The teachers themselves took turns in arriving very early at school to start the soup or cereal, or whatever the simple nutritious lunch might be. The cost of the lunches was kept within range of from 2 to 5 cents per child. The effect upon the children was remarkable. It increased both their alertness and efficiency. No prouder Crusaders can be found than the colored school children in Cairo.

Tuberculosis Work Under the Municipality in St. Louis

Dr. Joseph F. Bredeck, Tuberculosis Controller of the City of St. Louis and a member of the Board of Directors of the Tuberculosis Society of St. Louis, describes the work of the municipality of St. Louis in its effort to prevent the spread of tuberculosis. This work, he states, is conducted jointly by the tuberculosis controller and the municipal nurses and the results are proving satisfactory.

The majority of all tuberculosis cases in St. Louis are supervised in their homes by the nurses of the municipal staff. The city has been divided into 14 districts with a health center in each district and a staff of 32 nurses work in these districts from the various centers as headquarters. A head nurse has charge of all health work in each district, including clinics, and she with three supervising nurses standardize the nursing technique, correlating the work of the districts in accordance with the general policies of the organization.

Twenty-six tuberculosis clinics, four of which are night clinics, are held each week.

Our health work in St. Louis includes, with tuberculosis, the supervision of the young child from birth to school age and the care of pregnant women. We do not give bedside care, but refer any tuberculosis patients who need such care to the nurses of the Visiting Nurses Association, a private organization. *Our nurses investigate all cases reported to the Health Department. Sixty-five per cent. of all cases reported are reported by private physicians. We make no distinction in the follow-up wrk with these patients. The nurses are given very definite instructions, compiled by the tuberculosis chief, with the superintendent of the municipal nurses.*

The tuberculosis controller holds a joint conference weekly with clinic physicians and nurses to discuss cases and formulate plans. At these conferences the work of the preceding week is summed up and a basis formed for the succeeding week. When a case is reported to the Health Department by a private physician, the head nurse in the district calls up the physicians for special instructions and also to give him an opportunity to tell his patient the truth regarding the latter's condition, if he has not already done so.

Every three months a form letter with addressed stamped envelope for reply is sent to the physician requesting his opinion on the case. These letters serve two purposes. They give us the medical finding for our records and they let the physician know that the nurses is still carrying the case. One of the chief responsibilities of the nurses is in checking, if possible, the spread of tuberculosis by examination of all contacts, either by private physician or in clinics.

All arrangements for admission to Koch Hospital, the city institution for the treatment of tuberculosis, except patients transferred from the City Hospital are made through the office of the tuberculosis controller. We work in close cooperation with the Tuberculosis Society as well as all other social agencies. We also receive some subsidy from the Tuberculosis Society and from the local chapter of the American Red Cross. All policies are directed from the offices of the Municipal Nurses.

The following is the form sent to the doctors periodically for their opinions:

Municipal Visiting Nurses

MEMORANDUM

Request for.....

Description of Case:

M ....., living at ....., has been under Municipal nursing supervision since ....., states that ..... is receiving medical care from you. If this is the case, may we have a short statement regarding ..... condition at this time?

Thanking you for your interest and cooperation,

Yours truly,

.....

Please send reply on back of this sheet.

Date .....

Nurse .....

Referred to .....

Date .....

Office .....

The nurse is a very favorable factor in tuberculosis work under the municipality of St. Louis. It is absolutely essential that either the patient or some responsible member of the family know the true diagnosis, also that they are thoroughly familiar with tuberculosis as a communicable disease. Therefore, the nursing service is a means of teaching both the patient and other members of his family how to prevent the spread of disease through contact. If the patient is under the care of a private physician, the nurse must ascertain whether the physician has told the patient that he has tuberculosis. If he has not, then the physician is notified that he must do so for protection of the other members of the family, as well as the public. It is desirable to have the physician give out this information but if he will not do this the nurse is authorized to do so.

The nurse also must instruct the family and the patient in the hygiene and sanitation of tuberculosis and also the public health problem involved therein.

The nurse must not discuss diagnosis or treatment with the patient. This is left absolutely to the physician in charge and does not concern the nurse.

All cases reported as tuberculous must be visited in the home by the Municipal nurses. If for any reason it seems advisable to discontinue such visiting the tuberculosis controller must O. K. the request.

If the private physician seems noncooperative, the supervisor or senior nurse must do the visiting. Close cooperation with the physician is urged.

Nurses are required to visit cases as often as possible and to help in every way to a more thorough understanding of conditions. The nurse also must inquire into the social and economic problems of her cases, since peace of mind is one of the factors in successful treatment or the disease.

Specific instructions regarding the care of tuberculous patients are given to each nurse. These instructions are according to a printed form, and a questionnaire to be sent out by the nurse on every case must be turned in to her chief. The following are the instructions and questionnaire:

(*Continued on page* 11)

Framingham Makes Nursing Appropriation

Every year Framingham holds a town meeting at which the budget for the following year is usually acted upon. This year it was discovered by the finance committee that in the recodification of the Massachusetts laws which has just been enacted by a special session of the legislature that all towns in Massachusetts were limited to $2,000 for infant welfare work to be spent for nursing service. Consequently the finance committee felt that the town could not appropriate more than $2,000 for infant welfare work to be spent under the direction of the Board of Health. Accordingly, only $2,000 was appropriated, though $4,000 had been asked for.

The representative of the town of Framingham at the Legislature immediately introduced a bill amending the law in this respect by striking out the sum established in the statute and making it possible for towns to spend an indefinite sum for nursing service. In this he was supported by the representatives of several other towns who also had overstepped the bounds laid down in the statute. By special vote this was made an emergency measure, so that it took effect on its passage.

At the special town meeting held in July appropriations of a second $2,000 to make up the amount necessary to carry two nurses in the employ of the Board of Health through the year was recommended by the finance committee and passed by a unanimous vote.

Suggestions from the Field

This department of the Bulletin is conducted in connection with the Loan Service Bureau of the Publicity Department. It is designed to give valuable suggestions regarding new lines of work or new methods originated or successfully used by tuberculosis associations throughout the country. Tuberculosis workers are invited to send the National Association Bulletin Editor all information suitable for publication in these columns.

Disease Preventions in Shop

Tchula, Mississippi, boasts of a merchant who takes particular pride in the appearance and sanitary condition of his shop. Sometime ago he had printed a series of "don't" placards which aroused the ire of some of his fellow citizens. But the shop keeper, who was an ardent follower of the teachings of the Mississippi Tuberculosis Association was undaunted. He had a leaflet printed in which he placed the list of "don'ts" opposite a list of privileges which his costumers were ironically invited to enjoy if they so preferred. Both lists follow:

Don't sit in the spittons.

Don't spit or sit, stand or squat, lie or crawl in the door, on the counters or on the floor.

Don't lean on the showcases.

Don't handle fruits.

Don't ask credit.

Don't eat here.

Help keep the shop neat.

Don't litter floor or front.

Throw garbage into the garbage can, and other refuse into the waste baskets.

If they believed it would help his business, his patrons could enjoy the following:

Walk in, gents; make yo' se'ves at home.

Sit in the spittons.

Sit and spit, stand and squat, lie and sprawl in the door, on the counters and on the floor.

Cuss and swear, rip and tear, dance and prance, snore and cavort.

Hang out here; we have nothing better to do than to entertain you.

Eat your fruits in this store; throw the rinds, peels and skins on the floor; also spit the pulps on the floor.

Litter floor and front with paper scraps, cheese rinds, nut shells and whatnots.

We want this joint to be home-like.

This suggestion might be helpful to a number of shopkeepers in districts where this sort of expedient would bring desired results.

Factory Anti-Spitting Poster

The Maryland Tuberculosis Association has just issued an anti-spitting poster especially designed for use in factories.

The poster carries six illustrations telling the workman where he should and should not expectorate. Requests for sample copies may be addressed to the Maryland Tuberculosis Association, 704 N. Howard Street, Baltimore, Md.

Trade Unions in the Tuberculosis Fight

A number of inquiries have been addressed from time to time to the secretary of the Buffalo Association inquiring as to the benefits received through the trades union section. It is needless to say that an organization of this character, banded together for the purpose of assisting in the fight against tuberculosis can not be otherwise but of great assistance in any community for the reason that the machinery is already installed, and it only becomes necessary to enlist the interest of the various organizations by calling their attention to advantages which can be gained and to educating its members that tuberculosis is not inevitable, but that it is preventable, and that no one power more than the power of organized labor can help exterminate it from our country.

The Trades Union Section of the Buffalo Tuberculosis Association was organized in 1911, some sixty-seven organizations forming this section. It is made up by each individual organization, electing two of their number as delegates, with one additional delegate for each one hundred members. A per capita tax of 10 cents is charged per member per year.

In Buffalo's struggle for adequate hospital facilities the Trades Union Section had no small part. At least fifty representatives of organized labor accompanied the city officials on inspection trips to the various sites which were submitted for the erection of a building for the accommodation of advanced cases. The Buffalo City Hospital, which has a building for the care and treatment of these cases, was erected through the efforts of these representatives. Very naturally, too, it has lent its support to possible legislation which would improve working men's conditions, and has exerted every influence to defeat what appeared at times to be misconceived legislation. To these ends the section a number of times has sent representatives to legislative hearings at Albany. What influence the section had is, of course, unknown, but its representatives have always been received cordially, and its communications have always been given careful consideration. Through the efforts of the section and its representatives, the City of Buffalo has appropriated $1,000,000 to double the capacity of the J. N. Adam Memorial Hospital (Buffalo's hospital for the care and treatment of incipient cases).

During the last year, 1920, the section authorized the printing and framing of the now well known "Danger Ahead" posters which have been distributed to a number of industrial establishments and wherever workmen congregate. Through the delegates representing the different organizations, all of the individual members have been brought in touch with the health activities of the community. The executive secretary of the Buffalo Association, by virtue of his office, is placed in a position whereby he can gain admittance to the meeting halls for the purpose of giving talks and showing slides and motion pictures dealing with the fight.

The opportunity is presented to bring to the wage-earner direct the necessity for health protection. Emphasis is made of the information available that tuberculosis is responsible for nearly one-third of all the deaths occurring between the ages of eighteen and forty-five. Comparatively few die either before or after the wage earning period.

The funds which are obtained through the per capita assessment are used exclusively for Trades Union health work. All paid service is performed at the expense of the general association.

St. Louis "Puts 'Em Over"

The tuberculosis ball game held in St. Louis has become a well known and popular feature of the campaign, not only in that city but all over the country This year the event which was held on July 27th at the National League ball park had an added attraction. Miss V. A. L. Jones who has charge of the publicity and promotion work for the Tuberculosis Society of St. Louis wrote to Christy Mathewson, who is now "taking the cure" at Saranac, asking him to cooperate by autographing some base balls. "Matty" replied with his characteristic spirit of helpfulness. His letter follows:

"Dear Miss Jones:

I will gladly autograph the base balls mentioned in your recent letter.

Yours truly,

CHRISTY MATHEWSON."

The four balls which he had autographed were sold at auction by the well known comedian, Frank Moulan, and brought an average of $20 each. That "Christy" is still as popular as ever was manifested in the enthusiastic cheers for "Matty" which were given by the entire crowd preceding the sale of these balls.

The program consisted of two ball games: one by the Army from Jefferson Barracks near St. Louis and the Navy Team from the Great Lakes Naval Training Station near Chicago;

and the other between the St. Louis "Cardinals" and the Philadelphia "Athletics." A spectacular sight was the parade of the Army and Navy and Marine Corps troops with the two ball teams and two bands led by a detachment of marines. These marines had fought at Château-Thierry and all had at least one personal decoration and numerous citations. Two hundred wounded soldiers from the local hospitals were in the audience.

A feature of the day was the sale of 38,000 score cards by society women. These cards contained educational matter about the tuberculosis society and its work. They were sold for 25c. each. With these was included a coupon which entitled the holder to one of 38,000 presents which had been donated by local business concerns.

Officers of outside tuberculosis organizations who were present to observe the game were: D. E. Breed of the Texas Public Health Association, A. A. Speer, president of their Missouri Tuberculosis Association, Miss Erle Chambers, Arkansas Public Health Association, and James L. Feiser, manager of the Southwestern Division of the American Red Cross.

With 15,000 persons, among whom were the Governor of Missouri and Mayor of St. Louis, many officers and prominent civilians present in body, and Christy Mathewson present in spirit, this annual ball game was a great success in every way.

Framingham Yardsticks Exhibit for Loan or Sale

The Framingham demonstration is offering for loan or sale copies of the "Framingham Yardstick Exhibit," as shown at the annual meeting of the National Tuberculosis Association in New York.

The exhibit consists of twenty panels, of which photographic reproductions have been made on attractive cards, 14" x 17". The subjects on each panel are as follows:

1. Framingham Yardsticks.
2. Framingham Children's Health Camp (illustrated).
3. Framingham School Committee Dental Clinic (illustrated).
4. Framingham Health Department Baby Clinics (illustrated).
5. How Much Tuberculosis Is There?
6. How Many Cases Should Be Under Care?
7. What Special Machinery Will Find Cases?
8. How Many Cases Should Be Found Early?
9. How Many Beds Are Necessary for Tuberculosis?
10. How Many Cases Should Have Institutional Care?
11. What Are the Points of Attack Against Tuberculosis?
12. What Are the Essential Anti-Tuberculosis Measures?
13. What Does Effective Health Work cost?

(*Continued on page* 12)

Tuberculosis Work in St. Louis

(*Continued from page* 9)

WHAT THE NURSE MAY TEACH IN MAKING A HOME VISIT ON A TUBERCULOUS PATIENT

1. It is absolutely essential that either the patient or some responsible member of the family know the true diagnosis. Also that they are thoroughly familiar with tuberculosis as a communicable disease.
2. If the patient is under the care of a private physician the nurse must get into communication with him for the purpose of finding out if he has told the patient that he or she has tuberculosis. If he has not the physician is to be notified that this must be done for the protection of the other members of the family as well as the public. It is desirable to have the physician give out this information. If he will not do this the nurse is authorized to do so.
3. The nurse must instruct the family and the patient in the Hygiene and Sanitation of tuberculosis, and also the Public Health problem involved.
4. Teaching Hygiene and Sanitation here means:
   a. Instruction in rooming and sleeping alone.
   b. Isolation of dishes.
   c. Proper disposal of sputum.
   d. Rest, proper food and ventilation.

   Teaching Tuberculosis from the Public Health angle means:
   a. Danger of mass contact infection, especially to young children.
   b. Infection of adults.
   c. Reinfection of patients.
5. What the nurse may not teach or discuss with patient:
   a. Diagnosis.
   b. Treatment.

   This is left absolutely to the physician in charge and does not concern the nurse.
6. All cases reported as tuberculous must be visited in the home by the Municipal Nurse, no exception is made to this such as request from private physician. If for any reason it seems advisable to discontinue the visiting, Dr. Bredeck (Director of Tuberculosis) must O.K. same.
7. If the private physician seems non-cooperative the visiting must be done either by Supervisor or Senior Nurse. Do not send students to vissit private physician's cases. Always wear your Municipal Badge.
8. Always do your very best to cooperate with private physician, but always be truthful about the nature and spread of tuberculosis.
9. In giving out literature on tuberculosis always read it over carefully with patient so that it may be thoroughly understood.
10. A nurse cannot visit an open case of tuberculosis too often. Frequent visiting is necessary on such cases if protection in the home is accomplished.
11. The Municipal Nurse must not advise the patient of a private physician to come to the City Clinics.

POINTS THAT SHOULD BE KNOWN ON EVERY CASE OF TUBERCULOSIS HANDLED BY NURSE

MEDICAL PROBLEM

1. Is the patient an active case of tuberculosis? Suspect?
   a. Positive Sputum.
2. Has the patient had a complete examination?
   If not, why not?
3. Is the patient under definite medical care?
   a. Whose?
   b. When was the patient last seen by a physician?
4. Give the number of exposures in the home.
   a. Age and sex.
5. Is the case reported to the Health Department?
6. Have all exposures been examined?
   a. When and were?
7. Is the nursing care adequate? If not, why not?
   a. Municipal Nurses.
   b. Visiting Nurses.
   c. Other agencies or individuals.

SOCIAL AND ECONOMIC PROBLEM

1. Is the income adequate?
   What is the actual income?

(*Continued on page* 12)

Tuberculosis Work in St. Louis

(*Continued from page* 11)

2. What do you consider is the minimum income required for this family?
3. If there is a deficiency because the wage earner is unable to earn as much as formerly or is sent to a hospital, what provision is being made to supply the deficiency?
   a. How much has the agency spent in relief for the family? Over what period of time?
   b. How much has been spent for special diet or other items pertaining to the tuberculosis problem?
4. What other problems are outstanding in the family?
   a. Employment. Is the work of all employed members suitable?
   b. Housing and sanitation.
   c. Neglect of the children.
   d. Household management.
   e. Miscellaneous.
5. What agencies are reported by the confidential exchange? Have they been consulted?
6. What agency is responsible for the Social Service in the family?
7. Is the social care adequate? If not, why not?
8.

LEGAL

1. Has compulsory removal been necessary or advisable? Has Heauth Department cooperated in this?
2. Has forcible examination of children been necessary? Has Juvenile Probation Department assisted?
3. Have facilities at Koch Hospital been adequate to meet all needs?

Framingham Yardsticks

(*Continued from page* 11)

14. What Will $2 Per Capita Buy in Health Machinery?
15. What Will These Measures Do for Tuberculosis Control?
16. Framingham Industrial Clinic (illustrated).
17. Framingham State Normal School Dietetic Class (illustrated).
18. Framingham Civic League (illustrated).
19. The Framingham Community Health Station (illustrated).
20. Framingham Facts (illustrated).

The cards may be secured through the Framingham office of the Health Demonstration, Crouch Building, Framingham, Mass.

Annual Meeting of A. P. H. A.

In connection with the semi-centennial to be held November 14 to 18, by the American Public Health Association, four undertakings are planned. They are: (1) The customary scientific sessions; (2) Health Institute; (3) Health Exposition; (4) Publication of a Jubilee Volume on the history of the last fifty years of public health. In addition to the regularly established sessions there will be special programs on the subjects of Child Hygiene, Public Health Education and Publicity, and also health sermons in churches on the Sunday preceding the meetings.

Child Health Demonstration

Mansfield and Richmond County, Ohio, have been selected by the National Child Health Council as the scene for a unique demonstration of what American communities can do toward the most healthful development of their children. Eighty communities have been competing to obtain distinction and advantage of this study. Conditions in Mansfield and Richmond County most nearly complied with the qualifications laid down by the Council for the purpose of securing a typical American community. The demonstration will cover a period of five years and will deal with children of all ages. The American Red Cross has appropriated $200,000 for the work. County and state officers, business men, physicians and citizens have promised cooperation, in carrying out this practical demonstration of what a typical American community can do to increase the health of the next generation. Member organizations of the National Child Health Council are the American Child Hygiene Association, American Red Cross, Child Health Organization of America, National Child Labor Committee, National Organization for Public Health Nursing, and the National Tuberculosis Association.

The National Child Health Council has secured Dr. Walter H. Brown, who was formerly health officer of Bridgeport, Conn., and Associate Director of the Department of Health Service, American Red Cross, and who is now with the Commission for the Prevention of Tuberculosis in France, to become Director of the Child Health Demonstration.

Cancer Week October 30th to November 5th

National Cancer Week is to be held by the American Society for the Control of Cancer, October 30 to November 5, 1921. Mr. F. J. Osborne, Director of the Society which has its national headquarters at 25 West 45 Street, New York City, has asked the National Health Council members and their respective staffs for suggestions.

The aim of this campaign is entirely educational and designed to reach as many people as possible. The organization as planned at present, will include a state chairman and a local committee for every community of five thousand population or more. The activities to be undertaken will be grouped under three heads, namely: lectures, literature, and other publicity. The society will furnish at cost a circular "Vital Facts About Cancer" at $20.00 for five thousand. This is recommended as the best single piece of literature for popular distribution, although other publicity material may be obtained from the American Society for the Control of Cancer.

Since this organization has been unanimously recommended by the Committee on Membership and will, undoubtedly, soon be a member of the National Health Council, it is hoped that the date of the campaign will be kept in mind and the various units will be ready to cooperate with the Cancer Control Committees.

Lovejoy Heads American Association of Social Workers

At Milwaukee in June, Mr. Owen R. Lovejoy, General Secretary of the National Child Labor Committee, was elected President of the American Association of Social Workers, formerly known as the National Social Workers' Exchange. The Association, as J. B. Buel, its Secretary, describes its purposes in the Survey "is to be an organization of social workers. It is consciously to direct the development of this new profession. It is to be organized on a national scale and most important of all, perhaps, it is to afford an opportunity for social workers to control the performance of certain definite and concrete functions, such as placements, professional research, national guidance, recruiting and popular education.

Physicians' Clinic

Physicians of Maine were given an opportunity to study tuberculosis in a peculiarly advantageous manner during a week's clinic held at the Central Maine Sanatorium at Failfield, beginning August first. The clinic was promoted by the Maine Public Health Association and conducted under the auspices of the Board of Trustees of the State Sanatorium. Among the special speakers were Dr. Edward O. Otis of Boston, Dr. James Alexander Miller of New York and others of national prominence. The clinic was largely attended by physicians.

Similar schools or clinics are being conducted in a number of other states throughout the country.